FORM D

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

OMB Approval

3235-0076

OMB Number: Expires: November 30, 2001

stimated average burden

Hours per response . . 16.00



03038922

OTICE OF SALE OF SECURITIES NOV 26 2013 PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY Prefix Serial DATE RECEIVED

| | 1 1 | | | |
|--|--|--|--|--|
| Name of Offering (check if this is an amendment and name has changed, and indicate change.) | A | | | |
| Mindshare Technologies, Inc. Series B Convertible Preferred Stock Offering | | | | |
| Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 | Section 4(6) ULOE | | | |
| Type of Filing: New Filing Amendment | THE OF THE PROPERTY OF THE PRO | | | |
| A. BASIC IDENTIFICATION DATA | 2000 | | | |
| Enter the information requested about the issuer | NON & 45 COUD | | | |
| Name of Issuer (check if this is an amendment and name has changed, and indicate change.) | là là | | | |
| Mindshare Technologies, Inc. | 14 x 127 B | | | |
| Address of Executive Offices (Number and Street, City, State, Zip Code) | Telephone Number (Including Area Code) | | | |
| 310 East 4500 South, Suite 150, Salt Lake City, Utah 84107 | (801) 263-2333 | | | |
| Address of Principal Business Operations (Number and Street, City, State, Zip Code) | Telephone Number (Including Area Code) | | | |
| (if different from Executive Offices) | | | | |
| Brief Description of Business Market customer feedback systems | | | | |
| Type of Business Organization | | | | |
| | her (please specify): | | | |
| ■ corporation | niei (piease specify). | | | |
| Month Year | | | | |
| Actual or Estimated Date of Incorporation or Organization: $\begin{bmatrix} 0 & 2 \end{bmatrix}$ $\begin{bmatrix} 0 & 2 \end{bmatrix}$ μ | ■ Actual | | | |
| Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State; | , | | | |
| CN for Canada; FN for other foreign jurisdiction) U | T | | | |
| μ The issuer organized as a Utah limited liability partnership in February 2002 and converted to a Utah C corporation in November 2002. | | | | |
| CENERAL INSTRUCTIONS | | | | |

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicted on the filing of a federal notice.

> Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (2-99) 1 of 8



| Enter the information reque | Enter the information requested for the following: | | | | | | | | |
|---|---|---------------------------------------|---------------------------------------|-------------------|---------------------------------|--|--|--|--|
| Each promoter of the | • Each promoter of the issuer, if the issuer has been organized within the past five years; | | | | | | | | |
| Each beneficial owner | • Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; | | | | | | | | |
| Each executive office | r and director of | corporate issuers and of | corporate general and ma | anaging partner | rs of partnership issuers; and | | | | |
| Each general and mar | naging partner of | partnership issuers. | | | | | | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | ☐ Executive Officer | Director | General and/or Managing Partner | | | | |
| Full Name (Last name first, if inc | lividual) | · · · · · · · · · · · · · · · · · · · | | | | | | | |
| Stucki, Jeffrey | | | | | | | | | |
| Business or Residence Address (| Number and Str | eet, City, State, Zip Cod | e) | | | | | | |
| 267 west Hidden Hollow Drive | Orem, Utah 840 | 58 | | | | | | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | Executive Officer | ■ Director | General and/or Managing Partner | | | | |
| Full Name (Last name first, if inc | dividual) | | | | | | | | |
| Stucki, Mathew | · | · · · · · · · · · · · · · · · · · · · | | | | | | | |
| Business or Residence Address (| | | e) | | | | | | |
| 267 west Hidden Hollow Drive | | | | | | | | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | E Executive Officer | Director | General and/or Managing Partner | | | | |
| Full Name (Last name first, if inc | dividual) | | | | | | | | |
| Sperry, John | | · · · · · · · · · · · · · · · · · · · | · · · · · · · · · · · · · · · · · · · | | | | | | |
| Business or Residence Address (| | | | | | | | | |
| 310 East 4500 South, Suite 150, | | Jtah 84107 | | | | | | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | Executive Officer | ☑ Director | General and/or Managing Partner | | | | |
| Full Name (Last name first, if inc | dividual) | | | | | | | | |
| Rowbotham, Shawn | | | | | | | | | |
| Business or Residence Address (| | | ;) | | | | | | |
| 310 East 4500 South, Suite 150, | Salt Lake City, I | Jtah 84107 | | | | | | | |
| Check Box(es) that Apply: | Promoter | ☐ Beneficial Owner | ☐ Executive Officer | Director | General and/or Managing Partner | | | | |
| Full Name (Last name first, if inc | dividual) | | | | | | | | |
| Parke, John | | | | | | | | | |
| Business or Residence Address (| Number and Stre | eet, City, State, Zip Code | e) | | | | | | |
| 8415 Harker Drive Potomac, N | ID 20854 | | | | | | | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | ☐ Executive Officer | Director | General and/or Managing Partner | | | | |
| Full Name (Last name first, if inc | dividual) | | | | | | | | |
| Hanks, Richard | | | | | | | | | |
| Business or Residence Address (| Number and Str | eet, City, State, Zip Code | e) | | | | | | |
| 2945 Alvera Drive Salt Lake Cit | ty, Utah 84117 | | • | | | | | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | ☐ Executive Officer | Director | General and/or Managing Partner | | | | |
| Full Name (Last name first, if inc | dividual) | | | | | | | | |
| Boyer, James | | | | | | | | | |
| Business or Residence Address (| Number and Stre | et, City, State, Zip Code | e) | | | | | | |
| 310 East 4500 South, Suite 150, | Salt Lake City, I | Jtah 84107 | | | | | | | |

A. BASIC IDENTIFICATION DATA

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

| Check Box(es) that Apply: | Promoter | Beneficial Owner | ☐ Executive Officer | ☐ Director | General and/or Managing Partner |
|---|-----------------|-----------------------------|---------------------|------------|---------------------------------------|
| Full Name (Last name first, if in | ndividual) | | | | |
| Sommerville, Dean | | | | | |
| Business or Residence Address | (Number and St | reet, City, State, Zip Code | e) | | |
| 9468 S. Wasatch View Circle South Jordan, Ut 84095 | | | | | |
| Check Box(es) that Apply: | Promoter | ☑ Beneficial Owner | ☐ Executive Officer | Director | General and/or Managing Partner |
| Full Name (Last name first, if in | ndividual) | | | | |
| Grover, Leonard | | | | | |
| Business or Residence Address | (Number and St | reet, City, State, Zip Code | e) | | |
| 10242 S Brookcrest Cir South Jordan, Ut 84095 | | | | | |
| Check Box(es) that Apply: | Promoter | ■ Beneficial Owner | ☐ Executive Officer | ☐ Director | General and/or Managing Partner |
| Full Name (Last name first, if in | ndividual) | | | | |
| Whale Investments, Ltd. | | | | | |
| Business or Residence Address | (Number and St | reet, City, State, Zip Code | e) | | |
| 24 White Pines Canyon Rd Parl | City UT 84060 | | | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | ☐ Executive Officer | ☐ Director | General and/or Managing Partner |
| Full Name (Last name first, if in | ndividual) | | | | |
| Orie Santillo | | | | | |
| Business or Residence Address | (Number and St | reet, City, State, Zip Code | e) | | |
| 7205 Little Dell Court Apt. #6 | Park City 8406 | 0 | • | | |
| Check Box(es) that Apply: | Promoter | ■ Beneficial Owner | ☐ Executive Officer | ☑ Director | General and/or Managing Partner |
| Full Name (Last name first, if in | ndividual) | | | | A A A A A A A A A A A A A A A A A A A |
| Vayda, Tom | | | | | · |
| Business or Residence Address | (Number and St | reet, City, State, Zip Code | e) | <u> </u> | |
| 2667 Aspen Springs Dr. , Park | City, Utah 8406 | 0 | | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | ☐ Executive Officer | Director | General and/or Managing Partner |
| Full Name (Last name first, if in | idividual) | | | | , |
| Stucki, Brent and Debra | | | | | |
| Business or Residence Address | (Number and St | reet, City, State, Zip Cod | e) | | |
| HC64 Box 3006 Castle Valley, UT 84532 | | | | | |

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| B . INFORMATION ABOUT OFFERING | | |
|---|-------------|---------------|
| 1. Has the issuer sold or does the issuer intend to sell, to non-accredited investors in this offering? | Yes | No |
| Answer also in Appendix, Column 2, if filing under ULOE. | Ø | |
| 2. What is the minimum investment that will be accepted from any individual? | \$ N/A | |
| 3. Does the offering permit joint ownership of a single unit? | Yes | No |
| 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. | | E |
| Full Name (Last name first, if individual) Omni Brokerage | | |
| Business or Residence Address (Number and Street, City, State, Zip Code) | | |
| 10542 South Jordon Gateway Suite 330, South Jordon, Utah 84095 | | |
| Name of Associated Broker or Dealer Robert L. Sperry | | |
| States in Which Person Listed Has Solicited or Intends to Solicit Purchasers | | |
| (Check "Ail States" or check individual States) | | |
| [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] | | |
| [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] | | |
| [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] | | |
| [RI] [SC] [SD] [TN] [TX]x[UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] | | |
| | | |
| Full Name (Last name first, if individual) | | |
| Business or Residence Address (Number and Street, City, State, Zip Code) | | |
| Name of Associated Broker or Dealer | | · · · · · · · |
| States in Which Person Listed Has Solicited or Intends to Solicit Purchasers | | |
| (Check "All States" or check individual States) | | |
| [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] | | |
| [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] | | |
| [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] | | |
| [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] | | |
| Full Name (Last name first, if individual) | | |
| Business or Residence Address (Number and Street, City, State, Zip Code) | | |
| Name of Associated Broker or Dealer | | |
| States in Which Person Listed Has Solicited or Intends to Solicit Purchasers | | |
| (Check "All States" or check individual States) | | |
| [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] | | |
| [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MO] | | |
| [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] | | |
| [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] | | |
| for for tool tool trul for that the turning the tent full full full | | |

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| C | . OF | FERI | NG PR | ICE, | NUMB | ER OF | INVE | ESTOR | RS, EX | PENSES | AND | USE | OF P | ROCE | EEDS | |
|---------|---------|---------|------------|----------|------------|------------|---------|----------|--------|--------------|---------|----------|------|------|------|---|
| gate of | ffering | price o | f securiti | es inclu | ided in th | is offerin | g and t | he total | amount | already sole | d. Ente | er "0" i | f | | | _ |

| 1. | Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if | ····· | |
|----|--|-------------------|------------------------|
| | answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the column below | | |
| | the amounts of the securities offered for exchange and already exchanged. | Aganagata | Amount Alegady |
| | Type of Security | Aggregate | Amount Already Sold |
| | | Offering Price | |
| | Debt | \$ | \$ |
| | Equity | \$ <u>170,000</u> | \$ <u>170,000</u> |
| | ☐ Common ☑ Preferred | \$ | ·\$ |
| | Convertible Securities (including warrants) | • | \$ |
| | Partnership Interests | J | |
| | Other (Specify) | \$ | \$ |
| | Total | \$170,000 | \$ <u>170,000</u> |
| | Answer also in Appendix, Column 3, if filing under ULOE | | |
| 2. | Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the | | |
| | aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have | | |
| | purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "O" if answer is "none" or | | |
| | "zero." | | |
| | | Number | Aggregate |
| | | Investors | Dollar Amount |
| | | | of Purchases |
| | Accredited Investors | \$ <u> </u> | \$80,000 |
| | Non-accredited Investors | \$3 | \$90,000 |
| | Total (for filings under Rule 504 only) | \$ | \$ |
| | Answer also in Appendix, Column 4, if filing under ULOE. | | |
| 3. | If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to | | |
| | date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. | | |
| | Classify securities by type listed in Part C ~ Question 1. | | |
| | Type of offering | Type of | Dollar Amount |
| | | Security | Sold |
| | Rule 505 | \$ | \$ |
| | Regulation A | \$ | \$ |
| | Rule 504 | \$Preferred Stock | \$ 265,000 |
| | Total | | \$ <u>265,000</u> |
| 4. | a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. | | |
| ٦. | Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future | | |
| | contingencies. If the amount of an expenditure is not know, furnish an estimate and check the box to the left of the estimate. | | |
| | | | S |
| | Transfer Agent's Fees | _ | \$ |
| | Printing and Engraving Costs | | \$ 5.000 |
| | Legal Fees | <u> </u> | |
| | Accounting Fees | <u> </u> | \$1,000 |
| | Engineering Fees | | \$ |
| | Sales Commissions (Specify finder's fees separately) | | \$ |
| | Other Expenses (identify)Finder's Fees Paid in Stock at a 6% commission | Œ | \$ 4,475 |
| | Total | | <u>\$ 10,475</u> |

| b. Enter the difference between the aggre | regate offering price given in response to Part C - Question 1 | | |
|--|--|------------------------------|----------------------------|
| and total expenses furnished in response | | | |
| "adjusted gross proceeds to the issuer." | | | \$ <u>159.525</u> |
| 5. Indicate below the amount of the adjuste | d gross proceeds to the issuer used or proposed to be used for | | |
| each of the purposes shown. If the am | ount for any purpose is not known, furnish an estimate and | | |
| check the box to the left of the estimate. | The total of the payments listed must equal the adjusted gross | 3 | |
| proceeds to the issuer set forth in respons | se to Part C-Question 4.b. above. | | |
| | | Payments to | |
| | | Officers, Directors, & | Payments To |
| | | Affiliates | Others |
| | | | S |
| | | | □ \$ |
| • | machinery and equipment | | □ \$ |
| Construction or leasing of plant buildings and | d facilities | . 🗆 \$ | \$ |
| Acquisition of other businesses (including | he value of securities involved in this offering that may be | | |
| used in exchange for the assets or securit | ies of another issuer pursuant to a merger) | . 🗆 \$ | □ \$ |
| Repayment of indebtedness | | . 🗆 \$ | ≥ \$ 14,000 |
| Working capital | · 🔲 \$ | ■ \$ 145,525 | |
| Other (specify): | | | |
| | | | |
| | | □ \$ | \$ |
| Column Totals | | . D \$ | □ \$ |
| Total Payments Listed (column totals added | l) | · 🗷 S | 159,525 |
| | | _ , | |
| | D. FEDERAL SIGNATURE | | |
| | b. Federal Signature | | |
| The issuer has duly caused this notice to h | e signed by the undersigned duly authorized person. If this | notice if filed under Rule 5 | 05 the following signature |
| constitutes an undertaking by the issuer to | furnish to the U.S. Securities and Exchange Commission, up | | |
| by the issuer to any non-accredited investor | pursuant to paragraph (b)(2) of Rule 502. | | |
| Issuer (Print or Type) | Signature | Date | |
| | | November [0], 2003 | |
| Mindshare Technologies, Inc. Name of Signer (Print or Type) | Title of Signer (Print of Type) | | |
| Traine of Signer (Trint of Type) | printe of digital (Time of Type) | | |
| John Sperry | Chief Executive Officer | | |
| | | | |
| | | | |
| | | | |
| | ATTENTION | | |

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)